Fill in this information to identify your case:		
United States Bankruptcy Court for the: Eastern District of Michigan		
Case number (If known):	Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13	☐ Check if this amended filii

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself

	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1. Your full name		
Write the name that is on your government-issued picture identification (for example, your driver's license or	ARKEASHA First name LATRESE	First name
passport). Bring your picture	Middle name BURT	Middle name
identification to your meeting with the trustee.	Last name	Last name
	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2. All other names you		
have used in the last 8 years	First name	First name
Include your married or maiden names.	Middle name	Middle name
	Last name	Last name
	First name	First name
	Middle name	Middle name
	Last name	Last name
3. Only the last 4 digits of your Social Security	xxx - xx - <u>1</u> <u>2</u> <u>8</u> <u>0</u>	xxx - xx
number or federal	OR	OR
Individual Taxpayer Identification number (ITIN)	9 xx - xx	9 xx - xx

ARKEASHA LATRESE BURT

First Name

Middle Name

Last Name

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
4. Any business names and Employer Identification Numbers (EIN) you have used in		☑ I have not used any business names or EINs.	☐ I have not used any business names or EINs.		
	the last 8 years	Business name	Business name		
	Include trade names and doing business as names	Business name	Business name		
		EIN	EIN		
		EIN	EIN		
5.	Where you live		If Debtor 2 lives at a different address:		
		1314 HOUGHTON AVE.			
		Number Street	Number Street		
		SAGINAW MI 48602			
		City State ZIP Code	City State ZIP Code		
		SAGINAW			
		County	County		
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
		Number Street	Number Street		
		P.O. Box	P.O. Box		
		City State ZIP Code	City State ZIP Code		
6.	Why you are choosing	Check one:	Check one:		
	this district to file for bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.		
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)		

Part 2:

Tell the Court About Your Bankruptcy Case

7.	The chapter of the Bankruptcy Code you are choosing to file under	for Banki	eck one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box. Chapter 7 Chapter 11 Chapter 12 Chapter 13				
8.	How you will pay the fee	local your subm with I nee Appl I req By la less pay to	court for self, you nitting you a pre-per doto partication uest the law, a just than 15 the fee	pay the entire fee when I file my petition. Please check with the clerk's office in your court for more details about how you may pay. Typically, if you are paying the fee elf, you may pay with cash, cashier's check, or money order. If your attorney is itting your payment on your behalf, your attorney may pay with a credit card or check pre-printed address. If you choose this option, sign and attach the cation for Individuals to Pay The Filing Fee in Installments (Official Form 103A). Itest that my fee be waived (You may request this option only if you are filing for Chapter 7. W, a judge may, but is not required to, waive your fee, and may do so only if your income is than 150% of the official poverty line that applies to your family size and you are unable to the fee in installments). If you choose this option, you must fill out the Application to Have the ter 7 Filing Fee Waived (Official Form 103B) and file it with your petition.			
9.	Have you filed for bankruptcy within the last 8 years?	☑ No ☐ Yes.	District	Wh	nen	MM / DD / YYYY	Case number Case number Case number
10.	Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☑ No ☐ Yes.	District	Wh	nen	MM / DD / YYYY	Relationship to you Case number, if known Relationship to you Case number, if known
11.	Do you rent your residence?	☑ No. ☐ Yes.	□ No. □ Yes	our landlord obtained an eviction j			Against You (Form 101A) and file it as

Dorf 2

Report About Any Businesses You Own as a Sole Proprietor

				<u> </u>			
12.	Are you a sole proprietor of any full- or part-time	No.	Go to Part 4.				
	business?	☐ Yes.	Name and location of but	siness			
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as		Name of business, if any				
	a corporation, partnership, or LLC.		Number Street				
	If you have more than one sole proprietorship, use a separate sheet and attach it						
	to this petition.		City		State ZIP	Code	
			Check the appropriate be	ox to describe your business:			
			_	s (as defined in 11 U.S.C. § ²			
			☐ Single Asset Real Es	state (as defined in 11 U.S.C.	§ 101(51B))		
			☐ Stockbroker (as defin	ned in 11 U.S.C. § 101(53A))			
				as defined in 11 U.S.C. § 101	(6))		
			☐ None of the above				
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a <i>small business</i>	can set most red	appropriate deadlines. If yent balance sheet, stater	the court must know whether you indicate that you are a sment of operations, cash-flow kist, follow the procedure in 1	nall business deb statement, and f	otor, you must attach your federal income tax return or	r if
	For a definition of small	☐ No.	I am not filing under Cha	pter 11.			
		☐ No.	I am filing under Chapter the Bankruptcy Code.	11, but I am NOT a small bu	siness debtor ac	cording to the definition in	
		☐ Yes.	I am filing under Chapter Bankruptcy Code.	11 and I am a small busines	s debtor accordir	ng to the definition in the	
Pa	nrt 4: Report if You Own	or Have	Any Hazardous Prop	erty or Any Property Th	at Needs Imm	ediate Attention	
14.	Do you own or have any	☑ No					
	property that poses or is alleged to pose a threat	☐ Yes.	What is the hazard?				
	of imminent and identifiable hazard to						
	public health or safety?						
	Or do you own any property that needs immediate attention?		If immediate attention is	s needed, why is it needed? _			
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?						
			Where is the property?	Number Street			
				City		State ZIP Code	
				-			

ARKEASHA LATRESE BURT

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing	about
credit counseling because of:	

☐ Incapacity. I have a mental illness or a mental deficiency that makes me

incapable of realizing or making rational decisions about finances.

☐ **Disability.** My physical disability causes me

to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

 ☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing a	bout
credit counseling because of:	

☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ **Disability.** My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Case number (if known)

Pa	art 6: Answer These Ques	stions for Reporting Purposes				
16.	What kind of debts do you have?	16a. Are your debts primarily as "incurred by an individual pr		sumer debts are defined in 11 U.S.C. § 101(8) ly, or household purpose."		
	you nave:	No. Go to line 16b.✓ Yes. Go to line 17.				
				ess debts are debts that you incurred to obtain tion of the business or investment.		
		□ No. Go to line 16c.□ Yes. Go to line 17.				
		16c. State the type of debts you ow	e that are not consumer de	ebts or business debts.		
17.	Are you filing under Chapter 7?	□ No. I am not filing under Chapt	er 7. Go to line 18.			
	Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	Yes. I am filing under Chapter 7 administrative expenses and No	. Do you estimate that after re paid that funds will be av	r any exempt property is excluded and vailable to distribute to unsecured creditors?		
18.	How many creditors do you estimate that you owe?	✓ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999	1,000-5,000 5,001-10,000 10,001-25,000	☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than 100,000		
19.	How much do you estimate your assets to be worth?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	on \$1,000,000,001-\$10 billion llion \$10,000,000,001-\$50 billion		
	How much do you estimate your liabilities to be?	✓ \$0-\$50,000 ☐ \$50,001-\$100,000 ☐ \$100,001-\$500,000 ☐ \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 mill \$100,000,001-\$500 m	on		
Pa	rt 7: Sign Below	The same and the second	d l d			
Fo	or you	correct.	declare under penalty of pe	erjury that the information provided is true and		
				proceed, if eligible, under Chapter 7, 11,12, or 13 e under each chapter, and I choose to proceed		
		If no attorney represents me and I d this document, I have obtained and		someone who is not an attorney to help me fill out y 11 U.S.C. § 342(b).		
		I request relief in accordance with the	he chapter of title 11, United	d States Code, specified in this petition.		
			n fines up to \$250,000, or in	r obtaining money or property by fraud in connection nprisonment for up to 20 years, or both.		
		✗ /s/ ARKEASHA BURT	×	£		
		Signature of Debtor 1		Signature of Debtor 2		
		Executed on $\frac{06/20/2019}{MM / DD / YYY}$	<u>Y</u>	Executed on		

ARKEASHA LATRESE BURT

Case number (if known)_____

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ JANEY J. LAMAR	Date	06/20/2019
Signature of Attorney for Debtor		MM / DD /YYYY
JANEY J. LAMAR Printed name		
THE LAMAR LAW FIRM, P.L.L.C.		
Firm name		
P.O. BOX 3563		
Number Street		
SAGINAW	MI	48605
City	State	ZIP Code
Contact phone 989-439-0290	Email addre	ss LAMARLAW18@GMAIL.COM
P82160	MI	_
Bar number	State	

Fill in this information to identify your case:				
Debtor 1	ARKEASHA	LATRESE BURT		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States	Bankruptcy Court f	or the: Eastern District of Mic	chigan	
Case number	(If known)			

☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information 12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Part 1: Summarize Your Assets		
	Your asse	ets hat you own
Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0
1b. Copy line 62, Total personal property, from Schedule A/B	\$	6991.21
1c. Copy line 63, Total of all property on Schedule A/B	\$	23991.21
Part 2: Summarize Your Liabilities		
	Your liab Amount y	
2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	0
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ \$	0
Your total liabilities	\$	18126.93
Part 3: Summarize Your Income and Expenses		
4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	1374.82
Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	1694.00

ARKEASHA LATRESE BURT

First Name

dle Name Las

Case number (if known)	_
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D	rt	1	
Рα	rτ	4	

Answer These Questions for Administrative and Statistical Records

6. Are you filing for bankruptcy under Chapters 7, 11, or 13?

No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Yes

7. What kind of debt do you have?

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

_{\$} 1656.36

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim
From Part 4 on Schedule E/F, copy the following:	
9a. Domestic support obligations (Copy line 6a.)	\$0
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$0
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$0
9d. Student loans. (Copy line 6f.)	\$0
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$0
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+ \$0
9g. Total. Add lines 9a through 9f.	\$0

Fill in this information to identify your case and this filing:				
Debtor 1	ARKEASHA I	LATRESE BURT		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the: Eastern District of Michigan Case number				

Official Form 106A/B

Schedule A/B: Property

12/15

☐ Check if this is an amended filing

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? ■ No. Go to Part 2. Yes. Where is the property? What is the property? Check all that apply. Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Single-family home 1314 HOUGHTON AVE. Creditors Who Have Claims Secured by Property. ☐ Duplex or multi-unit building Street address, if available, or other description ☐ Condominium or cooperative Current value of the Current value of the Manufactured or mobile home entire property? portion you own? ☐ Land 17000 17000 ■ Investment property **SAGINAW** 48602 MI Describe the nature of your ownership ■ Timeshare City State ZIP Code interest (such as fee simple, tenancy by Other the entireties, or a life estate), if known. Who has an interest in the property? Check one. UNKNOWN Debtor 1 only **SAGINAW** Debtor 2 only County Check if this is community property Debtor 1 and Debtor 2 only (see instructions) At least one of the debtors and another Other information you wish to add about this item, such as local property identification number: 91-40-1-62-50000-000 If you own or have more than one, list here: What is the property? Check all that apply. Do not deduct secured claims or exemptions. Put ■ Single-family home the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Duplex or multi-unit building Street address, if available, or other description Condominium or cooperative Current value of the Current value of the ■ Manufactured or mobile home entire property? portion you own? Land ■ Investment property Describe the nature of your ownership City State ZIP Code interest (such as fee simple, tenancy by Other the entireties, or a life estate), if known. Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only County Debtor 1 and Debtor 2 only Check if this is community property (see instructions) At least one of the debtors and another Other information you wish to add about this item, such as local property identification number:

$_{ m Debtor1}$ ARKEASHA LATRESE BUR	Τ	
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AKKEAS	DO LA LA LA ESE	DUKI	
First Name	Middle Name	Last Name	

Case number (if known)

	Street address, if available City County	e, or other description State ZIP Code	What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only	Do not deduct secured clathe amount of any securer Creditors Who Have Claim Current value of the entire property? \$ Describe the nature of interest (such as fee the entireties, or a life.)	d claims on Schedule D: ns Secured by Property. Current value of the portion you own? \$ of your ownership simple, tenancy by
			Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this ite property identification number:		mmunity property
			II of your entries from Part 1, including any entries there		\$17000
Part 2	: Describe Your \	/ehicles			
Do you	ı own, lease, or have leg	al au auvitable intere	at the annual telephone with attended to the contract of the c		
you ow 3. Car	s, vans, trucks, tractors,	s. If you lease a vehicle	st in any vehicles, whether they are registered or re, also report it on Schedule G: Executory Contracts as, motorcycles	•	5
you ow 3. Car	s, vans, trucks, tractors, No Yes	s. If you lease a vehicle	e, also report it on Schedule G: Executory Contracts as, motorcycles Who has an interest in the property? Check one.	•	aims or exemptions. Put d claims on <i>Schedule D:</i>
you ow 3. Car	s, vans, trucks, tractors , No Yes . Make:	s. If you lease a vehicles sport utility vehicles DODGE	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	and Unexpired Leases. Do not deduct secured clathe amount of any securer	aims or exemptions. Put d claims on <i>Schedule D:</i>
you ow 3. Car 3.1.	s, vans, trucks, tractors, No Yes Make: Model: Year: Approximate mileage: Other information:	s. If you lease a vehicles sport utility vehicles DODGE AVENGER 2009 175068	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only	Do not deduct secured clathe amount of any secured Creditors Who Have Claim Current value of the entire property?	aims or exemptions. Put d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$ 475.00
you ow 3. Car 3.1.	s, vans, trucks, tractors, No Yes Make: Model: Year: Approximate mileage: Other information:	s. If you lease a vehicles sport utility vehicles DODGE AVENGER 2009 175068	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one.	Do not deduct secured clathe amount of any securer Creditors Who Have Claim Current value of the entire property? \$ 475.00 Do not deduct secured clathe amount of any securer creditors.	aims or exemptions. Put d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$ 475.00

RT	
•	ΚI

AKKEAS	DHA LATRES	EDUKI	
First Name	Middle Name	Last Name	

RKEASHA LATRESE BURT			Case number (if known)

3.3.	Make:	Who has an interest in the property? Check one.	Do not deduct secured cla the amount of any secured	
	Model:	Debtor 1 only	Creditors Who Have Clain	
	Year:	Debtor 2 only	Current value of the	Current value of the
	Approximate mileage:	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	entire property?	portion you own?
	Other information:	At least one of the deptors and another		
	Other information.	☐ Check if this is community property (see	\$	\$
		instructions)		
3.4.	Make:	Who has an interest in the property? Check one.	Do not deduct secured cla	
	Model:	Debtor 1 only	the amount of any secured Creditors Who Have Claim	
	Year:	Debtor 2 only		
		Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
	Approximate mileage:	At least one of the debtors and another	chare property.	portion you own.
	Other information:		\$	\$
		Check if this is community property (see instructions)	Ψ	Ψ
		instructions)		
2 N				
4.1.	Make:	Who has an interest in the property? Check one.	Do not deduct secured cla	
	Model:		the amount of any secure Creditors Who Have Clain	
	Year:	Debtor 2 only		
	Other information:	Debtor 1 and Debtor 2 only	Current value of the	Current value of the
		At least one of the debtors and another	entire property?	portion you own?
		☐ Check if this is community property (see instructions)	\$	\$
If you	u own or have more than one	list here:		
•		Who has an interest in the property? Check one	Do not deduct secured cla	dans an accounting Dat
4.2.	Make:	Debtor 1 only	the amount of any secure	d claims on <i>Schedule D:</i>
	Model:	Debtor 2 only	Creditors Who Have Clain	ns Secured by Property.
	Year:	Debtor 1 and Debtor 2 only	Current value of the	Current value of the
	Other information:	At least one of the debtors and another	entire property?	portion you own?
		☐ Check if this is community property (see	\$	\$
		instructions)		
			ı	
5. Add	the dollar value of the porti	on you own for all of your entries from Part 2, including any entries	for pages	¢ 475.00
		rite that number here		\$

rst Name Middle Name La

Case number (if known)_____

Part 3:

Describe Your Personal and Household Items

1. Noundernotes Describe	Do	you own or have any le	egal or equitable interest in any of the following items?	Current value portion you of Do not deduct sor exemptions.	own?
Examples: Major appliances, furniture, linens, china, kitchenware No	6.	Household goods and	furnishings		
No No No No No No No No		_	-		
WAJOR APPLIANCES AND FURNITURE S. 200.00 P. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell priones, cameras, media players, games No. Yes, Describe		□ No			
7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, meda players, games No Yes. Describe		— ····	MAJOR APPLIANCES AND FURNITURE		200.00
Examples: Televisions and radios; audio, video, stereo, and digital equipment; computens, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games No Yes. Describe		— 100. D0001100		\$	200.00
Examples: Televisions and radios; audio, video, stereo, and digital equipment; computens, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games No Yes. Describe	7	Flectronics			
collections; electronic devices including cell phones; cameras, media players, games No Yes, Describe	•		nd radios: audio video stereo and digital equipment: computers printers scanners: music		
No					
Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles No Security Pes. Describe		_			
8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles 2 No		Yes Describe	TELEVISION, FIRESTICK		20.00
Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other ant objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles No		— 100. D0001100	,	\$	20.00
Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other ant objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles No	Ω	Collectibles of value			
stamp, coin, or baseball card collections; other collections, memorabilia, collectibles No Yes. Describe	0.		figurings; pointings, prints, or other artwork; books, pictures, or other art objects;		
No					
Sequipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No			of bacoball data delications, ether delications, memorabilia, delications		
Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No Yes. Describe					
Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No Yes. Describe				\$	
Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No Yes. Describe	9	Equipment for sports a	nd hobbies		
and kayaks; carpentry tools; musical instruments No	٥.				
No					
Yes. Describe		•			
10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment No Yes. Describe				— .	
10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment No Yes. Describe		- 103. Describe		\$	
Examples: Pistols, rifles, shotguns, ammunition, and related equipment No Yes. Describe 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories No Yes. Describe EVERYDAY CLOTHING 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No Yes. Describe 13. Non-farm animals Examples: Dogs, cats, birds, horses No Yes. Describe 14. Any other personal and household items you did not already list, including any health aids you did not list No Yes. Give specific information	40	: :::::::::::::::::::::::::::::::::::			
In Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories No	10.				
□ Yes. Describe		_ '	snotguns, ammunition, and related equipment		
11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories No Yes. Describe EVERYDAY CLOTHING \$ 40.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No Yes. Describe 13. Non-farm animals Examples: Dogs, cats, birds, horses No Yes. Describe 14. Any other personal and household items you did not already list, including any health aids you did not list No Yes. Give specific information		= :::			
Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories No Yes. Describe EVERYDAY CLOTHING \$ 40.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No Yes. Describe 13. Non-farm animals Examples: Dogs, cats, birds, horses No Yes. Describe 14. Any other personal and household items you did not already list, including any health aids you did not list No Yes. Give specific information		Yes. Describe		\$	
Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories No Yes. Describe EVERYDAY CLOTHING \$ 40.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No Yes. Describe 13. Non-farm animals Examples: Dogs, cats, birds, horses No Yes. Describe 14. Any other personal and household items you did not already list, including any health aids you did not list No Yes. Give specific information		Clathaa			
No Yes. Describe	11.		han five lasthau anta dadinaan waa ahaan aanaania		
Yes. Describe EVERYDAY CLOTHING \$ 40.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No Yes. Describe		_ , , , ,	nes, rurs, leatner coats, designer wear, snoes, accessories		
12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No Yes. Describe			EVERYDAY CLOTHING		40.00
Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No Yes. Describe		Yes. Describe	272.77.57.77.020.77.11.70	\$	40.00
Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No Yes. Describe					
Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No Yes. Describe	12.	Jewelry			
gold, silver No Yes. Describe		•	elry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems,		
□ Yes. Describe			only, sectains joinerly, origagement image, measing image, nonseem joinerly, wateries, geries,		
□ Yes. Describe		☑ No			
13. Non-farm animals Examples: Dogs, cats, birds, horses No Yes. Describe				\$	
Examples: Dogs, cats, birds, horses No Yes. Describe					
No Yes. Describe 14. Any other personal and household items you did not already list, including any health aids you did not list No Yes. Give specific information	13.	Non-farm animals			
Yes. Describe 14. Any other personal and household items you did not already list, including any health aids you did not list No Yes. Give specific information		Examples: Dogs, cats, b	irds, horses		
Yes. Describe 14. Any other personal and household items you did not already list, including any health aids you did not list No Yes. Give specific information		☑ No		_	
14. Any other personal and household items you did not already list, including any health aids you did not list No Yes. Give specific information				\$	
No Yes. Give specific information					
No Yes. Give specific information	14	Any other personal and	household items you did not already list, including any health aids you did not list		
Yes. Give specific information		•	jeu alu liet allean, liet, liet alle alle jeu alu liet liet		
information				_	
15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$ 260.00				\$	
		information			
	15.	Add the dollar value of	all of your entries from Part 3, including any entries for pages you have attached	¢	260 00
				Φ	200.00

Middle Name

Case number	(if known)			

Ď		•	1	
Ρċ	ЭΓ.		4	

Describe Your Financial Assets

Do you own or have any l	egal or equitable interest in a	any of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
16. Cash <i>Examples:</i> Money you h	ave in your wallet, in your hom	ne, in a safe deposit box, and on hand when you	file your petition	
☑ No ☐ Yes			Cash:	\$
		nts; certificates of deposit; shares in credit union ultiple accounts with the same institution, list eac		
☐ No ☑ Yes		Institution name:		
18. Bonds, mutual funds, o	17.1. Checking account: 17.2. Checking account: 17.3. Savings account: 17.4. Savings account: 17.5. Certificates of deposit: 17.6. Other financial account: 17.7. Other financial account: 17.8. Other financial account: 17.9. Other financial account:	WALMART MONEY CARD		\$
	Institution or issuer name:	erage firms, money market accounts		Ψ
 19. Non-publicly traded st an LLC, partnership, a ☑ No ☑ Yes. Give specific information about them 	nd joint venture Name of entity:	rated and unincorporated businesses, includ	% of ownership:%%	\$ \$ \$
an LLC, partnership, a ✓ No ✓ Yes. Give specific information about	nd joint venture Name of entity:		% of ownership:%%	\$

20	Negotiable instruments i	nclude personal check	r negotiable and non-negotiable instruments ss, cashiers' checks, promissory notes, and money orders. not transfer to someone by signing or delivering them.		
	☑ No				
	Yes. Give specific information about	Issuer name:			
	them			\$	
				\$	
				\$	
21	Retirement or pension				
		RA, ERISA, Keogh, 40°	1(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans		
	□ No				
	Yes. List each account separately.	Type of account:	Institution name:		
			MERRYL LYNCH	\$	5855.59
		401(k) or similar plan:	WERKITE ETHORI	Φ	
		Pension plan:		\$	
		IRA:		\$	
		Retirement account:		\$	
		Keogh:		\$	
		Additional account:		\$	
		Additional account:			
		Additional account.		Φ	
	Examples: Agreements companies, or others No	deposits you have ma with landlords, prepaid	ade so that you may continue service or use from a company rent, public utilities (electric, gas, water), telecommunications		
	☐ Yes	Inst	itution name or individual:		
		Electric:		\$	
		Gas:		\$	
		Heating oil:		\$	
		Security deposit on rent	al unit:	\$	
		Prepaid rent:		\$	
		Telephone:		\$	
		Water:			
		Rented furniture:		Φ	
		Other:		Φ	
				\$	
23		r a periodic payment o	f money to you, either for life or for a number of years)		
	No No				
	☐ Yes	Issuer name and desc	ription:		
				-	
				\$	

Middle Name

Case number	(if known)

24. Interests in an education IRA 26 U.S.C. §§ 530(b)(1), 529A(l ☑ No ☐ Yes	o), and 529			
- 100	Institution	name and description. Separately file the records of any int	terests.11 U.S.C. § 521(c	():
				\$
				\$
				\$
25. Trusts, equitable or future in exercisable for your benefit	terests in p	property (other than anything listed in line 1), and rights	s or powers	
☑ No				
☐ Yes. Give specific				
information about them				\$
Examples: Internet domain nar		secrets, and other intellectual property es, proceeds from royalties and licensing agreements		
Yes. Give specific information about them				\$
L				
27. Licenses, franchises, and ot Examples: Building permits, ex	_	I intangibles nses, cooperative association holdings, liquor licenses, pro	fessional licenses	
☑ No				_
Yes. Give specific				¢.
information about them				\$
Money or property owed to you	?			Current value of the portion you own? Do not deduct secured claims or exemptions.
28. Tax refunds owed to you				·
No				
Yes. Give specific informat	ion	DEBTOR EXPECTS TO RECEIVE TAX		
about them, including	whether	REFUNDS FROM CITY OF SAGINAW.	Federal:	\$
you already filed the r and the tax years		AMOUNT IS ESTIMATED.	State:	\$
and the tax years			Local:	\$400
29. Family support Examples: Past due or lump so	um alimony	spousal support, child support, maintenance, divorce settl	ement, property settleme	ent
☑ No				
Yes. Give specific informat	ion			
			Alimony:	\$
			Maintenance:	\$
			Support:	\$
			Divorce settlement:	\$
			Property settlement:	\$
30. Other amounts someone ow				
Social Security ben		ance payments, disability benefits, sick pay, vacation pay, valued loans you made to someone else	workers' compensation,	
☑ No				
Yes. Give specific informat	ion			\$

Debtor 1	ARKEAS	HA LATRESE	BURT
	First Name	Middle Name	Last N

Middle Name Last Name Case number (if known)_

31.	Interests in insurance policies Examples: Health, disability, or life insurance	ce; health savings account (HSA);	credit, homeowner's, or renter's insurance	
	☑ No			
	Yes. Name the insurance company of each policy and list its value	Company name:	Beneficiary:	Surrender or refund value:
	• •			\$
				\$
				\$
00	A into a cating an analysis of its also seems			
32.	property because someone has died.		ce policy, or are currently entitled to receive	
	No			
	Yes. Give specific information			\$
33.	Claims against third parties, whether or Examples: Accidents, employment disputes No Yes. Describe each claim	-		
				\$
34.	Other contingent and unliquidated claims to set off claims No	s of every nature, including cou	interclaims of the debtor and rights	
	Yes. Describe each claim			
	Tes. Describe each claim.			\$
25	Any financial access you did not already	liat		
35.	Any financial assets you did not already	list		
	No Yes. Give specific information			
	Tes. Give specific information			\$
36.	Add the dollar value of all of your entries			6256,21
	for Part 4. Write that number here			\$
Pa	rt 5: Describe Any Business-R	Related Property You Ow	n or Have an Interest In. List any re	eal estate in Part 1.
37.	Do you own or have any legal or equitab	le interest in any business-relat	ed property?	
	No. Go to Part 6.	·		
	☐ Yes. Go to line 38.			
				Current value of the
				portion you own? Do not deduct secured claims or exemptions.
38.	Accounts receivable or commissions you	u already earned		
	☐ No	-		
	☐ Yes. Describe			
				\$
39.	Office equipment, furnishings, and supp			
		, modems, printers, copiers, fax machir	nes, rugs, telephones, desks, chairs, electronic devices	
	□ No			1
	Yes. Describe			\$
				1

First Name	Middle Name Last Name		
40. Machinery, fixtures, ed	quipment, supplies you use in business, and tools of your trade		
☐ No			
☐ Yes. Describe			\$
			Ψ
41. Inventory			
☐ No☐ Yes. Describe			
Tes. Describe			\$
42. Interests in partnershi	ps or joint ventures		
☐ No			
☐ Yes. Describe	Name of entity:	% of ownership:	
		%	\$
		%	\$
		%	\$
43. Customer lists, mailing	g lists, or other compilations		
□ No			
	include personally identifiable information (as defined in 11 U.S.C. § 101(41A))?	
☐ No			
Yes. Description	ribe		\$
			Φ
44 Any business-related	property you did not already list		
No No	property you did not already list		
Yes. Give specific			
information			\$
			\$
			\$
			\$
			Ψ
			\$
			\$
45 Add the dollar value o	f all of your entries from Part 5, including any entries for pages you have atta	ached	
	umber here	_	\$
Part 6: Describe Ar	ny Farm- and Commercial Fishing-Related Property You Own or Hav	ve an Interest In	
	have an interest in farmland, list it in Part 1.	o an interest in	
46. Do you own or have a	ny legal or equitable interest in any farm- or commercial fishing-related prop	erty?	
☑ No. Go to Part 7.			
Yes. Go to line 47.			
			Current value of the
			portion you own?
			Do not deduct secured claims or exemptions.
47. Farm animals			o
Examples: Livestock, p	oultry, farm-raised fish		
□ No			
☐ Yes			7

Middle Name

48. Crops—either growing or harvested			
☐ No ☐ Yes. Give specific information			\$
49. Farm and fishing equipment, implements, machinery, fixtures No Yes			7
1 165			\$
50. Farm and fishing supplies, chemicals, and feed			
☐ No ☐ Yes]
			\$
51. Any farm- and commercial fishing-related property you did no	ot already list		
Yes. Give specific information			\$
52. Add the dollar value of all of your entries from Part 6, including for Part 6. Write that number here			\$
Part 7: Describe All Property You Own or Have a	an Interest in That	You Did Not List Above	
53. Do you have other property of any kind you did not already li	st?		
Examples: Season tickets, country club membership No			
Yes. Give specific information			\$ \$
			\$
54. Add the dollar value of all of your entries from Part 7. Write th	at number here	→	\$
Part 8: List the Totals of Each Part of this Form			1
55. Part 1: Total real estate, line 2			\$17000
56. Part 2: Total vehicles, line 5	\$475		
57. Part 3: Total personal and household items, line 15	\$260.00		
58. Part 4: Total financial assets, line 36	\$6256.21		
59. Part 5: Total business-related property, line 45	\$0		
60. Part 6: Total farm- and fishing-related property, line 52	\$0		
61. Part 7: Total other property not listed, line 54	+\$0		
62. Total personal property. Add lines 56 through 61	\$ 6991.21	Copy personal property total	+\$6991.21
63. Total of all property on Schedule A/B. Add line 55 + line 62			\$23991.21

Fill in this information to identify your case:					
Debtor 1	ARKEASHA LATRESE BURT				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the: Eastern District of Michigan					
Case number(If known)					

Official Form 106C

Schedule C: The Property You Claim as Exempt

04/19

☐ Check if this is an amended filing

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Pa	Part 1: Identify the Property You Claim as Exempt							
 Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you. ☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) ☑ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2) For any property you list on Schedule A/B that you claim as exempt, fill in the information below. 								
		Brief description of the property and line on Schedule A/B that lists this property		Amount of the exemption you claim	Specific laws that allow exemption			
	, , ,		Copy the value from Schedule A/B	Check only one box for each exemption.				
	Brief description: Line from Schedule A/B:	REAL ESTATE 1.1	\$ <u>17000</u>	□ \$ 17000 ✓ 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(1)			
	Brief description: Line from Schedule A/B:	CAR 3.1	\$	\$ 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(2)			
	Brief description: Line from Schedule A/B:	HOME GOODS	\$	□ \$ ■ 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)			
3.	(Subject to adju	Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? No						

st Name Middle Name Last N

ast Name

Part 2:

Additional Page

Brief description of the property and line on Schedule A/B that lists this property		Current value of the Amount of the exemption you claim portion you own		Specific laws that allow exemption	
		Copy the value from Schedule A/B	Check only one box for each exemption		
Brief description: Line from Schedule A/B:	ELECTRONICS 7	\$	\$ 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)	
Brief description: Line from Schedule A/B:	CLOTHING 11	\$17000_	\$ 475.00 \$ 100% of fair market value, up to any applicable statutory limit	1374.82	
Brief description: Line from Schedule A/B:	DPST OF MONEY 17	\$62	\$ \$ 100% of fair market value, up to any applicable statutory limit	1694.00	
Brief description: Line from Schedule A/B:	RETIREMENT ACC 21	\$5855.59	\$ 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)	
Brief description: Line from Schedule A/B:	TAX REFUND 28	\$400.00	\$ 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)	
Brief description: Line from Schedule A/B:		\$	\$ 100% of fair market value, up to any applicable statutory limit	1656.36	
Brief description: Line from Schedule A/B:		\$	\$ \$ 100% of fair market value, up to any applicable statutory limit		
Brief description: Line from Schedule A/B:		\$	□ \$ □ 100% of fair market value, up to any applicable statutory limit		
Brief description: Line from Schedule A/B:		\$	\$ to any applicable statutory limit		
Brief description: Line from Schedule A/B:		\$	\$ 100% of fair market value, up to any applicable statutory limit		
Brief description: Line from Schedule A/B:		\$	\$ 100% of fair market value, up to any applicable statutory limit		
Brief description: Line from Schedule A/B:		\$	\$ 100% of fair market value, up to any applicable statutory limit		

Case number (if known)_

Fill in this information to identify your case	e:			
Debtor 1 ARKEASHA LATRESE BI	JRT			
First Name Middle Na	me Last Name			
Debtor 2 (Spouse, if filing) First Name Middle Na	me Last Name			
United States Bankruptcy Court for the: Eastern D	istrict of Michigan			
Case number			Observation 2	:
(If known)			☐ Check i amende	if this is an ed filing
				•
Official Form 106D				
Schedule D: Creditors	s Who Have Claims Secure	ed by Prop	erty	12/15
information. If more space is needed, copy additional pages, write your name and cas 1. Do any creditors have claims secured by	. ,	and attach it to this	form. On the top of	
Part 1: List All Secured Claims				
for each claim. If more than one creditor ha	ore than one secured claim, list the creditor separately as a particular claim, list the other creditors in Part 2. abetical order according to the creditor's name.	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
2.1	Describe the property that secures the claim:	\$17000	\$17000	\$17000
Creditor's Name]		
Number Street				
	As of the date you file, the claim is: Check all that apply.			
11 1374.82	☐ Contingent ☐ Unliquidated			
City State ZIP Code	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only Debtor 2 only	An agreement you made (such as mortgage or secured car loan)			
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	Judgment lien from a lawsuit			
☐ Check if this claim relates to a	Other (including a right to offset)	-		
community debt Date debt was incurred	Last 4 digits of account number			
2.2	Describe the property that secures the claim:	\$	\$	\$
Creditor's Name]		
Number Street				
	As of the date you file, the claim is: Check all that apply.	-		
	Contingent			
City State ZIP Code	☐ Unliquidated ☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	☐ An agreement you made (such as mortgage or secured			
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			

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community debt

Date debt was incurred

■ At least one of the debtors and another

☐ Check if this claim relates to a

Judgment lien from a lawsuitOther (including a right to offset)

Last 4 digits of account number

Add the dollar value of your entries in Column A on this page. Write that number here:

Fill in this information to identify your case:						
Debtor 1	ARKEASHA LATRESE BURT					
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the: Eastern District of Michigan						
Case number (If known)			_			

☐ Check if this is an amended filing

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

Pa	art 1: List All of Your PRIORITY Unsecure	d Claims				
1.	Do any creditors have priority unsecured claims No. Go to Part 2. Yes.	against you?				
2.	each claim listed, identify what type of claim it is. If a nonpriority amounts. As much as possible, list the cl unsecured claims, fill out the Continuation Page of F	editor has more than one priority unsecured claim, list the claim has both priority and nonpriority amounts, list the laims in alphabetical order according to the creditor's not at 1. If more than one creditor holds a particular claim	at claim	n here and vou have	d show both pr more than two	iority and
	(For an explanation of each type of claim, see the in	structions for this form in the instruction dookiet.)	Total	claim	Priority	Nonpriority
	_		IOlai	Ciaiiii	amount	amount
2.1	Priority Creditor's Name	Last 4 digits of account number	\$	17000	\$17000	\$17000
		When was the debt incurred?				
	Number Street 11 1374.82 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only	As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Type of PRIORITY unsecured claim:	<i>y</i> .			
	Debtor 1 and Debtor 2 only	☐ Domestic support obligations				
	At least one of the debtors and another	☐ Taxes and certain other debts you owe the government				
	☐ Check if this claim is for a community debt	☐ Claims for death or personal injury while you were				
	Is the claim subject to offset? ☐ No	intoxicated Other. Specify				
	☐ Yes	_ Carlot: Speeding	-			
2.2	Priority Creditor's Name	Last 4 digits of account number	\$		\$	\$
		When was the debt incurred?				
	Number Street	As of the date you file, the claim is: Check all that apply	y .			
		☐ Contingent				
	City State ZIP Code	☐ Unliquidated				
	Who incurred the debt? Check one.	☐ Disputed				
	Debtor 1 only	Type of PRIORITY unsecured claim:				
	Debtor 2 only	☐ Domestic support obligations				
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Taxes and certain other debts you owe the government				
	☐ Check if this claim is for a community debt	☐ Claims for death or personal injury while you were intoxicated				
	Is the claim subject to offset? No Yes 19-21291-dob Doc 1 File	Other. Specify		Desi	23 of 47	

ARKEASHA LATRESE BURT			Case number (if known)
First Name	e Middle Name Last Name		

га	Part 2: List Air or Your NONPRIORTLY Orisecured Claims							
	Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. Yes							
	nonpriority unsecured claim, list the creditor se	parately for each	etical order of the creditor who holds each claim. If a creditor has h claim. For each claim listed, identify what type of claim it is. Do not claim, list the other creditors in Part 3.If you have more than three no	list claims already				
				Total claim				
,								
.1	TNT FINANCIAL		Last 4 digits of account number <u>0</u> <u>0</u> <u>0</u> <u>0</u>	8950.00				
	Nonpriority Creditor's Name		When was the debt incurred? $03/23/2018$	\$				
	Number Street							
	SAGINAW MI	48604						
	City State	ZIP Code	As of the date you file, the claim is: Check all that apply.					
			☑ Contingent					
	Who incurred the debt? Check one.		Unliquidated					
	_		Disputed					
	☐ Debtor 1 only ☐ Debtor 2 only		Disputed					
			Time of NONDRIORITY improving delains					
	Debtor 1 and Debtor 2 only		Type of NONPRIORITY unsecured claim:					
	At least one of the debtors and another		☐ Student loans					
	☐ Check if this claim is for a community del	bt	Obligations arising out of a separation agreement or divorce					
	•		that you did not report as priority claims					
	Is the claim subject to offset?		Debts to pension or profit-sharing plans, and other similar debts					
	☑ No		Other. Specify JUDGMENT					
	☐ Yes							
.2	WANIGAS CREDIT UNION		Last 4 digits of account number 0 0 0 0	\$ 9176.93				
			44/02/2047	Ψ				
	Nonpriority Creditor's Name		When was the debt incurred?					
	Number Street	10001	As of the date you file, the claim is: Check all that apply.					
	SAGINAW MI	48601	——————————————————————————————————————					
	City State	ZIP Code						
	Who incurred the debt? Check one.		☐ Unliquidated					
	☐ Debtor 1 only		☐ Disputed					
	Debtor 2 only							
	Debtor 1 and Debtor 2 only		Type of NONPRIORITY unsecured claim:					
	At least one of the debtors and another		☐ Student loans					
	At least one of the deptors and another		Obligations arising out of a separation agreement or divorce					
	☐ Check if this claim is for a community de	bt	that you did not report as priority claims					
	Is the claim subject to offset?		Debts to pension or profit-sharing plans, and other similar debts					
	No		Other. Specify JUDGMENT					
	☐ Yes							
	00							
.3			Last 4 digits of account number	•				
	Nonpriority Creditor's Name		When was the debt incurred?	Φ				
	Number Street							
	Oth.	710.0	As of the date you file, the claim is: Check all that apply.					
	City State	ZIP Code	_					
	Who incurred the debt? Check one.		☐ Contingent					
	Debtor 1 only		Unliquidated					
	Debtor 2 only		☐ Disputed					
	Debtor 1 and Debtor 2 only		T (NONDRIGHT)					
	At least one of the debtors and another		Type of NONPRIORITY unsecured claim:					
	_		☐ Student loans					
	☐ Check if this claim is for a community de	bt	Obligations arising out of a separation agreement or divorce					
	Is the claim subject to offset?		that you did not report as priority claims					
	□ No		Debts to pension or profit-sharing plans, and other similar debts					
	☐ Yes		Other. Specify					

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First Name

Middle Name

Last Name

Part 4:

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

			Total claim	
Total claims	6a. Domestic support obligations	6a.	\$	0
from Part 1	6b. Taxes and certain other debts you owe the government	6b.	\$	0
	6c. Claims for death or personal injury while you were intoxicated	6c.	\$	0
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d.	+\$	0
	6e. Total. Add lines 6a through 6d.	6e.	\$	0
			Total claim	
Total claims	6f. Student loans	6f.	\$	0
from Part 2	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0
	6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	+ \$	18126.93

6j. Total. Add lines 6f through 6i.

18126.93

Fill in this information to identify your case:						
Debtor	ARKEASHA LATRESE BURT					
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse If filing)	First Name	Middle Name	Last Name			
United States	higan					
Case number (If known)						

☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with wh	om you	have the contract or lease	State what the contract or lease is for	
2.1						
	Name					
	Number	Street				
	City		State	ZIP Code		
2.2						
	Name					
	Number	Street				
	City		State	ZIP Code		
2.3						
	Name					
	Number	Street				
	City		State	ZIP Code		
2.4						
	Name					
	Number	Street				
	City		State	ZIP Code		
2.5						
	Name					
	Number	Street				
	City	01001 dab	State	ZIP Code		

Fill in this information to identify your case:						
Debtor 1	ARKEASHA L	Last Name				
Debtor 2	First Name	Middle Name	Last Name			
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the: Eastern District of Michigan						
Case number (If known)						

1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.)

☐ Check if this is an amended filing

Official Form 106H

Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

	☑ No		
	☐ Yes		
	Within the last 8 years, have you lived in a community p Arizona, California, Idaho, Louisiana, Nevada, New Mexico,		` , , ,
	☐ No. Go to line 3.		
	lacksquare Yes. Did your spouse, former spouse, or legal equivalent	It live with you at the time?	
	☐ No		
	☐ Yes. In which community state or territory did you liv	e? F	Fill in the name and current address of that person.
	Name of your spouse, former spouse, or legal equivalent		
	Number Street		
	City State	ZIP Code	
	In Column 1, list all of your codebtors. Do not include yo		Construction of the second sec
0.	shown in line 2 again as a codebtor only if that person in Schedule D (Official Form 106D), Schedule E/F (Official Schedule E/F, or Schedule G to fill out Column 2.	s a guarantor or cosigner.	Make sure you have listed the creditor on
	Column 1: Your codebtor		Column 2: The creditor to whom you owe the debt
			Check all schedules that apply:
3.1			Schedule D, line
	Name		Schedule E/F, line
	Number Street		Schedule G, line
	City State	ZIP Code	
3.2			Schedule D, line
	Name		Schedule E/F, line
	Number Street		Schedule G, line
			Gottledule G, lifte
	City State	ZIP Code	
3.3			Schedule D, line
	Name		<u> </u>
	Number Street		Schedule E/F, line
	radition Street		☐ Schedule G, line
	City State	ZIP Code	
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Official Form 106H Schedule H: Your Codebtors page 1 of 1

F	ill in this in	formation to identify	your case:						
D	ebtor 1	ARKEASHA LATI							
_	.10	First Name	Middle Name	Last Name					
	ebtor 2 spouse, if filing)	First Name	Middle Name	Last Name		_			
U	nited States E	Bankruptcy Court for the: I	Eastern District of Michigan						
	ase number f known)					Check if t	this is:		
(1	i kilowii)					An am	nended filing		
							plement showing postpeti ne as of the following date		
Of	fficial Fo	rm 106l				MM / I	DD / YYYY		
S	ched	ule I: You	ir Income					12/15	
sup If y sep	oplying cor ou are sep parate shee	rect information. If yo arated and your spou	ou are married and not filingse is not filingse is not filing with you, done top of any additional page	g jointly, and you o not include info	ur spo ormat	ouse is living with ion about your spo	or 2), both are equally resp you, include information ak ouse. If more space is need known). Answer every ques	oout your spouse. ed, attach a	
		1 3							
1.	Fill in your informatio	employment n.		Debtor 1			Debtor 2 or non-filing	spouse	
	attach a se	more than one job, parate page with about additional	Employment status	☑ Employed☑ Not employed	ed		☐ Employed☐ Not employed		
	Include par self-employ	t-time, seasonal, or ed work.		CACLIED					
		n may include student aker, if it applies.	Occupation	CASHIER					
			Employer's name	WALMART					
			Employer's address	5825 BROCK	WA)	Y RD.			
				Number Street			Number Street		
							· -		
				SAGINAW MI 48638					
				City	State	e ZIP Code	City Sta	te ZIP Code	
			How long employed there	? <u>11 YEAR</u> S	;		11 YEARS		
Р	art 2:	Give Details About	Monthly Income						
		nonthly income as of ess you are separated.		. If you have nothin	ng to	report for any line, w	vrite \$0 in the space. Include	your non-filing	
	If you or yo	ur non-filing spouse ha	ave more than one employer ttach a separate sheet to this		rmatio	on for all employers	for that person on the lines		
	J 0.0.11 11 y 0	.a. 1100a 111010 opa00, a.	naon a coparato chece to univ			For Debtor 1	For Debtor 2 or non-filing spouse		
2.			ary, and commissions (before calculate what the monthly was		2.	s 1656	e		
3.		and list monthly over	ŕ	•	3.	\$ <u>1036</u> +\$	\$ + \$		
		·				<u> </u>			
4.	Calculate	gross income. Add lii	ne 2 + line 3.		4.	\$ <u>1656.00</u>	\$		

t Name Middle Name Last Name

Case number (if known)_____

		For	Debtor 1	For Debtor 2 or non-filing spouse
Copy line 4 here	→ 4.	\$	1656.00	\$
5. List all payroll deductions:				
5a. Tax, Medicare, and Social Security deductions	5a.	\$	156.84	\$
5b. Mandatory contributions for retirement plans	5b.	\$		\$
5c. Voluntary contributions for retirement plans	5c.	\$	71.60	\$
5d. Required repayments of retirement fund loans	5d.	\$	52.74	\$
5e. Insurance	5e.	\$		\$
5f. Domestic support obligations	5f.	\$		\$
5g. Union dues	5g.	\$		\$
5h. Other deductions. Specify:	5h.	+\$		+ \$
6. Add the payroll deductions . Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h	n. 6.	\$	281.18	\$
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	1374.82	. \$
8. List all other income regularly received:				
8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross				
receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$		\$
8b. Interest and dividends	8b.	\$		\$
8c. Family support payments that you, a non-filing spouse, or a depend regularly receive	lent			
Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$. \$
8d. Unemployment compensation	8d.			. \$
8e. Social Security	8e.	\$. \$
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assista that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	ance 8f.	\$		\$
	-	•		
8g. Pension or retirement income	8g.	\$		
8h. Other monthly income. Specify:	₋ 8h.	+\$. +\$ 1
9. Add all other income . Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	\$	0	\$
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	. \$	1374.82	+ \$0
11. State all other regular contributions to the expenses that you list in Scho			anta .va	ammatas and other
Include contributions from an unmarried partner, members of your household, friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are		·		
Specify:				1
12. Add the amount in the last column of line 10 to the amount in line 11. The				
Write that amount on the Summary of Your Assets and Liabilities and Certain	Statist	tical Inf	o <i>rmation,</i> if it	applies 1
13. Do you expect an increase or decrease within the year after you file this No.	form'	?		
Yes. Explain:				

Fill in this information to identify your case:			
Debtor 1 ARKEASHA LATRESE BURT	Check if this is:		
First Name Middle Name Last Name Debtor 2	_	ilina	
(Spouse, if filing) First Name Middle Name Last Name	———		etition chapter 13
United States Bankruptcy Court for the: Eastern District of Michigan		of the following	
Case number(If known)	MM / DD / YYYY		
(II KILOWII)			
Official Form 106J			
Schedule J: Your Expenses			12/15
Be as complete and accurate as possible. If two married people are filinformation. If more space is needed, attach another sheet to this form (if known). Answer every question.			_
Part 1: Describe Your Household			
1. Is this a joint case?			
✓ No. Go to line 2.			
Yes. Does Debtor 2 live in a separate household?			
□ No			
Yes. Debtor 2 must file Official Form 106J-2, Expenses for S	Separate Household of Debtor 2.		
2. Do you have dependents?	Dependent's relationship to	Dependent's	Does dependent live
Do not list Debtor 1 and Debtor 2. Yes. Fill out this information for each dependent	Debtor 1 or Debtor 2	age	with you?
Do not state the dependents' names.			☐ No ☐ Yes
			☐ No
			Yes
			☐ No ☐ Yes
			☐ Yes
			☐ Yes
			□ No
			☐ Yes
3. Do your expenses include expenses of people other than yourself and your dependents?			
Part 2: Estimate Your Ongoing Monthly Expenses			
Estimate your expenses as of your bankruptcy filing date unless you a	re using this form as a supplement in	a Chapter 12 or	aco to report
expenses as of a date after the bankruptcy is filed. If this is a supplemental applicable date.	•	-	•
Include expenses paid for with non-cash government assistance if you	ı know the value of		
such assistance and have included it on Schedule I: Your Income (Offi	cial Form 106l.)	Your expen	ises
 The rental or home ownership expenses for your residence. Include any rent for the ground or lot. 	first mortgage payments and 4.	\$	1374.82
If not included in line 4:			
4a. Real estate taxes	4 a.	\$	125
4b. Property, homeowner's, or renter's insurance	4b.	\$	120.00
4c. Home maintenance, repair, and upkeep expenses	4c.	\$	25.00
4d. Homeowner's association or condominium dues	4d.	\$	

Case number (if known)

Debtor 1

st Name Middle

lamo Last Na

			Your expenses
_	Additional martages payments for your residence, such as home equity loops	5.	\$1694.00
5.	Additional mortgage payments for your residence, such as home equity loans	5.	
6.	Utilities:		
	6a. Electricity, heat, natural gas	6a.	\$354_
	6b. Water, sewer, garbage collection	6b.	\$125.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$90.00
	6d. Other. Specify:	6d.	\$
7.	Food and housekeeping supplies	7.	\$11 U.S.C. §
8.	Childcare and children's education costs	8.	\$1656.36
9.	Clothing, laundry, and dry cleaning	9.	\$
10.	Personal care products and services	10.	\$
11.	Medical and dental expenses	11.	\$
12.	Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12.	\$
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$
14.	Charitable contributions and religious donations	14.	\$
15.	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.		
	15a. Life insurance	15a.	\$
	15b. Health insurance	15b.	\$
	15c. Vehicle insurance	15c.	\$
	15d. Other insurance. Specify:	15d.	\$
6.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.	\$
	Specify.	10.	Ψ
17.	Installment or lease payments:		
	17a. Car payments for Vehicle 1	17a.	\$
	17b. Car payments for Vehicle 2	17b.	\$
	17c. Other. Specify:	17c.	\$
	17d. Other. Specify:	17d.	\$
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I).	18.	\$
19.	Other payments you make to support others who do not live with you.		
	Specify:	19.	\$
20	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom		
∠∪.			\$
	20a. Mortgages on other property	20a.	
	20b. Real estate taxes	20b.	\$
	20c. Property, homeowner's, or renter's insurance	20c.	\$
	20d. Maintenance, repair, and upkeep expenses	20d.	\$
	20e. Homeowner's association or condominium dues	20e.	\$

Debtor 1	ARKEASHA LATRESE BURT	
Deptor 1	A COLLAGE ACTOR	

First Name Middle Name Last Name

Case number (if known)_____

21.	Othe	r. Specify:	21.	+\$
22.	Calc	alate your monthly expenses.		
	22a.	Add lines 4 through 21.	22a.	\$1694.00
	22b.	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	22b.	\$0
	22c.	Add line 22a and 22b. The result is your monthly expenses.	22c.	\$1694.00
22	Calcu	ate your monthly net income.		
		Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$1374.82
	23b.	Copy your monthly expenses from line 22c above.	23b.	-\$1694.00
:		Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> .	23c.	\$0
	For ex	u expect an increase or decrease in your expenses within the year after you file this form? ample, do you expect to finish paying for your car loan within the year or do you expect your age payment to increase or decrease because of a modification to the terms of your mortgage?		
	☐ Ye			

Fill in this information to identify your case:								
Debtor 1	ARKEASHA LATRESE BURT							
	First Name	Middle Name	Last Name					
Debtor 2								
(Spouse, if filing)	First Name	Middle Name	Last Name					
United States I Case number (If known)	Bankruptcy Court t	or the: Eastern District of Mic	higan					

☐ Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did you hav or agree to hav someone who is N	NOT an attorney to help you fill out bankruptcy forms?
No	to i an attorney to help you illi out bankruptcy forms?
Yes. Name of person	. Attach Bankruptcy Petition Preparer's Notice, Declaration, and
	Signature (Official Form 119).
Under penalty of perium, I dealers that I have	wood the common and selectules filed with this declaration and
that they are true and correct.	read the summary and schedules filed with this declaration and
✗ /s/ ARKEASHA BURT	*
Signature of Debtor 1	Signature of Debtor 2
00/00/0040	
Date MM / DD / YYYY	Date

Fill in this information to identify your case:								
Debtor 1	ARKEASHA I	_ATRESE BURT						
Debior 1	First Name	Middle Name	Last Name					
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name					
United States E	United States Bankruptcy Court for the: Eastern District of Michigan							
Case number (If known)								

☐ Check if this is an amended filing

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

04/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

	Give Details About Your Marital States at is your current marital status? Married Not married	us and Where Yo	ou Lived Before	
	ing the last 3 years, have you lived anywhere on No Yes. List all of the places you lived in the last 3 years.			
	Debtor 1:	Dates Debtor 1 lived there	Debtor 2:	Dates Debtor 2 lived there
	Number Street	From To	Same as Debtor 1 Number Street	Same as Debtor 1 From To
	City State ZIP Code		City State ZIP Code	
	Number Street	From To	Same as Debtor 1 Number Street	Same as Debtor 1 From To
3. With	City State ZIP Code hin the last 8 years, did you ever live with a sp	oouse or legal equi	City State ZIP Code valent in a community property state or territory? (da, New Mexico, Puerto Rico, Texas, Washington, and	Community property
			•	vviscotisiii.)

Part 2: Explain the Sources of Your Income

			 	 	 _		
N:	ame	_				ast	N

Case number (if known)		

Did you have any income from employmen Fill in the total amount of income you received fyou are filing a joint case and you have inco	I from all jobs and all busi	nesses, including part-tir	me activities.	youro.
☑ No ☑ Yes. Fill in the details.				
	Debtor 1		Debtor 2	
	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:	Wages, commissions, bonuses, tipsOperating a business	\$8695.94	Wages, commissions, bonuses, tipsOperating a business	\$
For last calendar year: (January 1 to December 31,2018)	✓ Wages, commissions, bonuses, tips✓ Operating a business	\$21533.00	☐ Wages, commissions, bonuses, tips☐ Operating a business	\$
For the calendar year before that: (January 1 to December 31, 2017 YYYY)	✓ Wages, commissions, bonuses, tips✓ Operating a business	\$21470.00	☐ Wages, commissions, bonuses, tips☐ Operating a business	\$
id you receive any other income during the actude income regardless of whether that income memployment, and other public benefit paymambling and lottery winnings. If you are filing ist each source and the gross income from each	ome is taxable. Examples ents; pensions; rental income a joint case and you have	of other income are alimome; interest; dividends; e income that you receive	money collected from laws ed together, list it only once	suits; royalties; and
Did you receive any other income during the notice income regardless of whether that income pulling the notice income regardless of whether that income properties income for the properties of	ome is taxable. Examples ents; pensions; rental income a joint case and you have	of other income are alimome; interest; dividends; e income that you receive	money collected from laws ed together, list it only once	suits; royalties; and
Did you receive any other income during the notice income regardless of whether that incomended income regardless of whether that incomended incoment, and other public benefit payments and lottery winnings. If you are filing and second income from each source and the gross income from each source and the gross income from each source and the gross incoments.	ome is taxable. Examples ents; pensions; rental income a joint case and you have	of other income are alimome; interest; dividends; e income that you receive	money collected from laws ed together, list it only once	suits; royalties; and
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Are e	either D	ebtor 1's or Del	otor 2's deb	ts primarily c	onsumer deb	ts?		
☐ N	No. Ne "ind	ither Debtor 1 necurred by an indiv	or Debtor 2 vidual primar	has primarily ily for a persor	consumer denal, family, or h	ebts. Consumer debts ar nousehold purpose."	e defined in 11 U.S.C. § 101((8) as
	Du	ring the 90 days	before you fi	led for bankrup	otcy, did you p	ay any creditor a total of	\$6,825* or more?	
		No. Go to line 7.						
		total amou	nt you paid th	nat creditor. Do	o not include p		or more payments and the upport obligations, such as his bankruptcy case.	
	* S	ubject to adjustm	nent on 4/01/	22 and every 3	3 years after th	at for cases filed on or a	fter the date of adjustment.	
Ø Y	⁄es. De l	btor 1 or Debtor	2 or both h	ave primarily	consumer de	bts.		
						ay any creditor a total of	\$600 or more?	
	V	No. Go to line 7.						
	_	creditor. Do	o not include	payments for	domestic supp ts to an attorne	oort obligations, such as ey for this bankruptcy ca	se.	Was this way
					Dates of payment	Total amount paid	Amount you still owe	Was this payment for
						\$	\$	☐ Mortgage
		Creditor's Name						☐ Car
		Number Street						☐ Credit card
								Loan repayment
								☐ Suppliers or vendor
		City	State	ZIP Code				☐ Other
						\$	\$	☐ Mortgage
		Creditor's Name						☐ Car
								☐ Credit card
		Number Street						☐ Loan repayment
								☐ Suppliers or vendor
		City	State	ZIP Code				☐ Other
		Oity	Otato	211 0000	_			
						c		П
						\$	\$	■ Mortgage
		Creditor's Name				Φ	\$	■ Mortgage■ Car
		Creditor's Name				\$	\$	
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						5	\$	☐ Car☐ Credit card

ich as child support	,					
l No │Yes. List all payme	ents to an insider.					
, ,			Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
			. ,			
Insider's Name				\$. \$	
Number Street						
City	State	ZIP Code				
				\$	\$	
Insider's Name						
Number Street						
Number Street						
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City ithin 1 year before to insider?	you filed for bankru			payments or trans	fer any property o	n account of a debt that benefited
City ithin 1 year before to insider? clude payments on the control of the contr	you filed for bankru	uptcy, did yo				
City ithin 1 year before to insider? clude payments on to No	you filed for bankru	uptcy, did yo	an insider.	Total amount paid	fer any property of Amount you still owe	n account of a debt that benefited Reason for this payment Include creditor's name
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First Name Middle Name Last Name

Case number	(if known)				

st all such matters, including personal inju d contract disputes.	•				
No Yes. Fill in the details.					
ros. I ili ili ulo dotallo.	Nature of	f the case	Court or agency		Status of the case
Case title WANIGAS V. BURT	Civil su	it for loan.	70TH DISTRICT	COURT	─ ☐ Pending
	_		111 S. MICHIGAI	N AVE.	On appeal Concluded
Case number 18-003893-GC	_		SAGINAW City Sta	MI 48602	_
Case title	_		Court Name		Pending On appeal
Case number	_		Number Street		Concluded
thin 1 year before you filed for bankrueck all that apply and fill in the details be No. Go to line 11. Yes. Fill in the information below.		ny of your property	City Sta		seized, or levied?
eck all that apply and fill in the details be No. Go to line 11.		ny of your property	epossessed, foreclosed, g		
eck all that apply and fill in the details be No. Go to line 11. Yes. Fill in the information below. WANIGAS CREDIT UNION Creditor's Name	elow.		epossessed, foreclosed, g	arnished, attached	value of the property
eck all that apply and fill in the details be No. Go to line 11. Yes. Fill in the information below. WANIGAS CREDIT UNION	elow.	Describe the propert WAGES Explain what happer	repossessed, foreclosed, g	Date	Value of the propert
WANIGAS CREDIT UNION Creditor's Name 1837 BAGLEY ST. Number Street SAGINAW MI	N 48601	Describe the propert WAGES Explain what happer Property was for Property	epossessed, foreclosed, g ed epossessed. preclosed. arnished.	Date	Value of the propert
WANIGAS CREDIT UNION Creditor's Name 1837 BAGLEY ST. Number Street SAGINAW MI	N	Describe the propert WAGES Explain what happer Property was r Property was f Property was g Property was g	ed epossessed, foreclosed, g ed epossessed. oreclosed. arnished. ttached, seized, or levied.	Date 05/30/2019	Value of the property \$162.77
WANIGAS CREDIT UNION Creditor's Name 1837 BAGLEY ST. Number Street SAGINAW MI	48601 Code	Describe the propert WAGES Explain what happer Property was for Property	ed epossessed, foreclosed, g ed epossessed. oreclosed. arnished. ttached, seized, or levied.	Date	Value of the propert

Official Form 107

No			
Yes. Fill in the details.			
	Describe the action the creditor took	Date action was taken	Amount
Creditor's Name	-	was taken	
			\$
Number Street			·
	-		
City State ZIP Code	Last 4 digits of account number: XXXX		
hin 1 year before you filed for bankrupt ditors, a court-appointed receiver, a cu	cy, was any of your property in the possession o	f an assignee for the benef	it of
uitors, a court-appointed receiver, a cui	stodian, or another official?		
Yes			
.			
: List Certain Gifts and Contribu	itions		
sin 2 years before you filed for bonkeye	tour did you give any gifts with a total value of m	are then \$600 ner nercen?	
	etcy, did you give any gifts with a total value of me	ore than \$600 per person?	
No			
Yes. Fill in the details for each gift.			
Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
	Describe the gifts		Value
per person	Describe the gifts		Value
	Describe the gifts		Value
per person	Describe the gifts		Value \$\$
per person	Describe the gifts		Value \$\$
per person Person to Whom You Gave the Gift	Describe the gifts		Value \$\$
per person Person to Whom You Gave the Gift	Describe the gifts		Value \$\$
Person to Whom You Gave the Gift Number Street	Describe the gifts		\text{Value} \$ \$
Person to Whom You Gave the Gift Number Street City State ZIP Code	Describe the gifts		\text{Value} \$ \$
Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600	Describe the gifts Describe the gifts	Dates you gave	Value \$ \$ Value
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First Name	Middle Name	Last Name	

Value Date of your Value of property V	Gifts or contributio that total more than	ons to charities			Value
that total more than \$600 Charity's Name S. S. Number Street City State ZIP Code City State ZIP Code City State ZIP Code City State ZIP Code S. List Certain Losses Cithin 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other saster, or gambling? A No Jest Fill in the details. Describe any insurance coverage for the loss localized the amount that insurance has paid. List pending insurance losts any localized the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/85 Property. List Certain Payments or Transfers (filtin 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone ou consulted about seeking bankruptcy or preparing a bankruptcy petition? clude any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. A No J Yes. Fill in the details. Description and value of any property transferred Date payment or transfer was made S. List Certain Payments or Transfers City Save ZIP Code Amount of payments was made S. List Certain Payments or Stransfers City Save ZIP Code	that total more than		Describe what you contributed		Value
Number Street	Charity's Name		_		
6: List Certain Losses fithin 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other sasster, or gambling? 1 No 1 Yes. Fill in the details. Describe the property you lost and how the loss occurred Describe any insurance coverage for the loss include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/S. Property. 1. List Certain Payments or Transfers 2. List Certain Payments or Transfers 3. List Certain Payments or Transfers 3. List Certain Payments or Transfers 4. List Certain P					\$
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First Name Middle Name

Person Who Was Paid Number Street City State ZIP Code State ZIP Code Steer din the ordinary course of your business or financial affairs? lude both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). No Yes. Fill in the details.				transfer was made	payment
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Person Who Was Paid Number Street S S S Number Street S S S S S S S S S S S S S	mised to help you deal with your credi	itors or to make payments to your cred		,	,
Number Street S S		Description and value of any property tra	ansferred	transfer was	Amount of payme
City State ZIP Code whin 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property interest or mortgage on your property interest or mortgage on your property). In our include gifts and transfers made as security (such as the granting of a security interest or mortgage on your property). In our include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details. Description and value of property transferred Describe any property or payments received or debts paid in exchange Description and value of property transferred Describe any property or payments received was made	Person Who Was Paid			mauc	
hin 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property isferred in the ordinary course of your business or financial affairs? ude both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Inch include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details. Description and value of property transfer Describe any property or payments received or debts paid in exchange Date transfer was made	Number Street	-			\$
hin 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property nsferred in the ordinary course of your business or financial affairs? Inde both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Independent of include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details. Description and value of property Describe any property or payments received or debts paid in exchange		-			\$
Insterred in the ordinary course of your business or financial affairs? Indee both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Indeed transfers that you have already listed on this statement. No Yes. Fill in the details. Description and value of property transferred Describe any property or payments received was made	City State ZIP Code	-			
Number Street City State ZIP Code Person's relationship to you Person Who Received Transfer Number Street		made as security (such as the granting of	a security interest or m	ortgage on your pro	perty).
Person's relationship to you	=	Description and value of property	,, ,		
Person's relationship to you	not include gifts and transfers that you had No Yes. Fill in the details.	Description and value of property	,, ,		
Person Who Received Transfer Number Street	not include gifts and transfers that you had No Yes. Fill in the details. Person Who Received Transfer	Description and value of property	,, ,		
Number Street	not include gifts and transfers that you hat No Yes. Fill in the details. Person Who Received Transfer Number Street	Description and value of property	,, ,		
	not include gifts and transfers that you had No Yes. Fill in the details. Person Who Received Transfer Number Street City State ZIP Code	Description and value of property transferred	,, ,		
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Oity State AIF Code	not include gifts and transfers that you had No Yes. Fill in the details. Person Who Received Transfer Number Street City State ZIP Code Person's relationship to you	Description and value of property transferred	,, ,		

Official Form 107

		1	ast	Nai	

Case number (if known)

are					
	e a beneficiary? (These are often called as	sset-protection devices.)			
	Yes. Fill in the details.				
		Description and value of the manner	why two works were al		Data transfer
		Description and value of the prope	rty transferred		Date transfer was made
	Name of trust	-			
rt	8: List Certain Financial Accounts	s Instruments Safe Denosit	Boxes and Storage	Units	
		· · · · · · · · · · · · · · · · · · ·			hanafit
	ithin 1 year before you filed for bankrupto sed, sold, moved, or transferred?	cy, were any financial accounts o	or mistruments neid in y	our name, or for your	benent,
	clude checking, savings, money market,	or other financial accounts; certi	ficates of deposit; shar	es in banks, credit un	ions,
	okerage houses, pension funds, coopera	atives, associations, and other fir	nancial institutions.		
_	No				
Ч	Yes. Fill in the details.				
		Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved,	Last balance befor closing or transfer
				or transferred	
	Name of Financial Institution	XXXX	☐ Checking		\$
	Number Street	700X <u> </u>	☐ Savings		-
	Number Street		☐ Money market		
			☐ Brokerage		
	City State ZIP Code		☐ Other		
			D		
	Name of Financial Institution	XXXX	Checking		\$
			☐ Savings ☐ Money market		
	Number Street		•		
			Brokerage		
			☐ Brokerage		
	City State ZIP Code		☐ Other		
. Do	City State ZIP Code	year before you filed for bankrup	Other	ox or other depository	<i>ı</i> for
se	you now have, or did you have within 1 curities, cash, or other valuables?	year before you filed for bankrup	Other	ox or other depository	<i>i</i> for
se	o you now have, or did you have within 1 curities, cash, or other valuables? No	year before you filed for bankrup	Other	ox or other depository	<i>r</i> for
se	o you now have, or did you have within 1 curities, cash, or other valuables? No		Other		
se	o you now have, or did you have within 1 curities, cash, or other valuables? No	year before you filed for bankrup Who else had access to it?	Other		Do you still have it?
se	o you now have, or did you have within 1 curities, cash, or other valuables? No		Other		Do you still have it?
se	o you now have, or did you have within 1 curities, cash, or other valuables? No		Other		Do you still have it?
se	you now have, or did you have within 1 curities, cash, or other valuables? No Yes. Fill in the details.	Who else had access to it?	Other		Do you still have it?
se	o you now have, or did you have within 1 curities, cash, or other valuables? No Yes. Fill in the details.	Who else had access to it?	Other		Do you still have it?

Las	t Nar

Case number (if known)

22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? No Yes. Fill in the details.					
	Who else has or had access to it?	Describe the contents	Do you still have it?		
			☐ No		
Name of Storage Facility	Name		☐ Yes		
Number Street	Number Street				
	City State ZIP Code				
City State ZIP Code					
Part 9: Identify Property You Ho	d or Control for Someone Else				
 23. Do you hold or control any property the or hold in trust for someone. No Yes. Fill in the details. 	nt someone else owns? Include any p	property you borrowed from, are storing f	or,		
	Where is the property?	Describe the property	Value		
Owner's Name	_		\$		
Number Street	Number Street				
	City State ZII	P Code			
City State ZIP Code	— City State Zir	Code			
Part 10: Give Details About Enviro	onmental Information				
For the purpose of Part 10, the following definitions apply: Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or					
Hazardous material means anything an	utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic				
substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred.					
24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?					
☑ No ☑ Yes. Fill in the details.					
	Governmental unit	Environmental law, if you know it	Date of notice		
Name of site	Governmental unit				
Number Street	Number Street				
	City State ZIP Code				
City State 71D Code					

KEASHA LATRESE BURT			Case number (if known)
Name	Middle Name	Last Name	

	25. Have you notified any governmental unit of any release of hazardous material?					
☑ No						
Yes. Fill in the details.						
	Governmental unit	Environmental law, if you know it	Date of notice			
Name of site	Governmental unit					
Number Street	Number Street					
	City State ZIP Cod	de .				
City State ZIP C	Code					
Have you been a party in any judicial	l or administrative proceeding unde	er any environmental law? Include settlemen	its and orders			
No	ii or administrative procesumg and	any environmental law . molade settlemen	no una oracio.			
Yes. Fill in the details.						
Test in in the details.	Court or agency	Nature of the case	Status of the			
	Court of agency	Nature of the case	case			
Case title			☐ Pending			
	Court Name		On appeal			
	Number Street		☐ Concluded			
	Number Street		Concluded			
Case number	City State Z	IP Code				
	ur Business or Connections to	Any Business	any husiness?			
. Within 4 years before you filed for ba	ankruptcy, did you own a business	Any Business or have any of the following connections to er activity, either full-time or part-time	any business?			
. Within 4 years before you filed for ba A sole proprietor or self-empl A member of a limited liability	ankruptcy, did you own a business loyed in a trade, profession, or othe y company (LLC) or limited liability	Any Business or have any of the following connections to er activity, either full-time or part-time	any business?			
A member of a limited liability A partner in a partnership An officer, director, or manage	ankruptcy, did you own a business loyed in a trade, profession, or othe y company (LLC) or limited liability	Any Business or have any of the following connections to er activity, either full-time or part-time partnership (LLP)	any business?			
A sole proprietor or self-empl A member of a limited liability A partner in a partnership An officer, director, or manag	ankruptcy, did you own a business ployed in a trade, profession, or other y company (LLC) or limited liability ging executive of a corporation are voting or equity securities of a co	Any Business or have any of the following connections to er activity, either full-time or part-time partnership (LLP)	any business?			
A sole proprietor or self-empl A member of a limited liability A partner in a partnership An officer, director, or manag An owner of at least 5% of the	ankruptcy, did you own a business ployed in a trade, profession, or other y company (LLC) or limited liability ging executive of a corporation are voting or equity securities of a corporation to to Part 12.	Any Business or have any of the following connections to er activity, either full-time or part-time partnership (LLP) rporation	any business?			
A sole proprietor or self-empl A member of a limited liability A partner in a partnership An officer, director, or manag	ankruptcy, did you own a business ployed in a trade, profession, or other y company (LLC) or limited liability ging executive of a corporation are voting or equity securities of a corporation to to Part 12.	Any Business or have any of the following connections to er activity, either full-time or part-time partnership (LLP) rporation business. siness Employer Identification	n number			
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. Within 4 years before you filed for bath A sole proprietor or self-emple A member of a limited liability A partner in a partnership An officer, director, or manage An owner of at least 5% of the No. None of the above applies. Government of Yes. Check all that apply above a	ankruptcy, did you own a business oloyed in a trade, profession, or other y company (LLC) or limited liability ging executive of a corporation he voting or equity securities of a cost to Part 12.	Any Business or have any of the following connections to er activity, either full-time or part-time partnership (LLP) rporation business. Employer Identification	n number Security number or ITIN.			
. Within 4 years before you filed for bath A sole proprietor or self-emple A member of a limited liability A partner in a partnership An officer, director, or manage An owner of at least 5% of the No. None of the above applies. Government of Yes. Check all that apply above a	ankruptcy, did you own a business bloyed in a trade, profession, or other company (LLC) or limited liability ging executive of a corporation se voting or equity securities of a corporation for the profession of	Any Business or have any of the following connections to er activity, either full-time or part-time partnership (LLP) rporation business Employer Identification Do not include Social in EIN:	n number Security number or ITIN.			
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. Within 4 years before you filed for ba	ankruptcy, did you own a business ployed in a trade, profession, or other y company (LLC) or limited liability ging executive of a corporation he voting or equity securities of a company for each dill in the details below for each describe the nature of the but have of accountant or books. Name of accountant or books.	Any Business or have any of the following connections to er activity, either full-time or part-time partnership (LLP) rporation business. siness	n number Security number or ITIN.			
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ARKEASHA I ATRESE BURT

ANNEASTIA LATNESE BOINT			Case number (if known)
First Name	Middle Name	Last Name	

		Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.
Business Name		-	EIN:
Number Street		Name of accountant or bookkeeper	Dates business existed
		-	
016	01-1- 7ID 0-1-	_	From To
City	State ZIP Code		
Within 2 years before	e vou filed for bankru	ptcv. did you give a financial statement to	anyone about your business? Include all financial
institutions, creditor		p,, , g a	,
☑ No			
Yes. Fill in the de	etails below.		
		Date issued	
Name		MM / DD / YYYY	
		_	
Number Street			
		-	
		-	
City	State ZIP Code	-	
City	State ZIP Code	-	
City	State ZIP Code	-	
		-	
		_	
rt 12: Sign Belov	v	nt of Financial Affairs and any attachment	ss. and I declare under penalty of periury that the
t 12: Sign Below I have read the ans	wers on this <i>Stateme</i>	nd that making a false statement, conceal	es, and I declare under penalty of perjury that the ing property, or obtaining money or property by fraud
t 12: Sign Below I have read the ans answers are true an in connection with	wers on this <i>Stateme</i> on correct. I understa		ing property, or obtaining money or property by fraud
t 12: Sign Below I have read the ans answers are true an in connection with	wers on this <i>Stateme</i>	nd that making a false statement, conceal	ing property, or obtaining money or property by fraud
I have read the ans answers are true and in connection with 18 U.S.C. §§ 152, 13	wers on this <i>Stateme</i> and correct. I understa a bankruptcy case ca 341, 1519, and 3571.	nd that making a false statement, conceal	ing property, or obtaining money or property by fraud
I 12: Sign Below I have read the ans answers are true and in connection with	wers on this <i>Stateme</i> nd correct. I understa a bankruptcy case ca 41, 1519, and 3571.	nd that making a false statement, conceal in result in fines up to \$250,000, or impriso	ing property, or obtaining money or property by fraud
I have read the ans answers are true and in connection with 18 U.S.C. §§ 152, 13	wers on this <i>Stateme</i> and correct. I understa a bankruptcy case ca 341, 1519, and 3571.	nd that making a false statement, conceal in result in fines up to \$250,000, or imprison. Signature of Debtor 2	ing property, or obtaining money or property by fraud
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UNITED STATES BANKRUPTCY COURT FOR THE EASTERN DISTRICT OF MICHIGAN

In Re:	ARKE	EASHA LATRESE BURT	Case No.					
			Chapter	7				
		Debtor(s).	Hon.	DANIEL S. OPPERMAN				
		STATEME	NT OF ATTORNEY FOR DEBTO	DR(S)				
			UANT TO F.R. BANKR.P. 2016(b)					
The und	lersigned	l, pursuant to F.R.Bankr.P. 2016(b), states the	hat:					
1.	The ur	ndersigned is the attorney for the Debtor(s)	in this case.					
2.	The co	The compensation paid or agreed to be paid by the Debtor(s) to the undersigned is: [Check one]						
	[X]	FLAT FEE						
	A.	For legal services rendered in contempla	ation of and in connection with this ca	ase, exclusive of the filing fee				
		paid		\$0.00				
	B.	Prior to filing this statement, received		\$0.00				
	C.	The unpaid balance due and payable is		. \$0.00				
	[]	RETAINER						
	A.	Amount of retainer received		·•				
	B.	The undersigned shall bill against the re	tainer at an hourly rate of \$	[Or attach firm hourly rate schedule.] Debtor(s				
		have agreed to pay all Court approved for	ees and expenses exceeding the amou	ant of the retainer.				
3.	\$0.00	of the filing fee has been paid.						
4.	In retu	rn for the above-disclosed fee, I have agree	d to render legal service for all aspect	ts of the bankruptcy case, including: [Cross out any				
	that do	o not apply.]						
	A.	Analysis of the debtor's financial situation bankruptcy;	on, and rendering advice to the debto	r in determining whether to file a petition in				
	B.	Preparation and filing of any petition, so	chedules, statement of affairs and plar	n which may be required;				
	C.	Representation of the debtor at the meet	ing of creditors and confirmation hea	ring, and any adjourned hearings thereof;				
5.	By agr	reement with the debtor(s), the above-disclo	sed fee does not include the following	g services: ADVERSARY PROCEEDINGS,				
	REAF	FIRMATIONS, OR REDEMPTIONS.						
6.	The so	ource of payments to the undersigned was fr	om:					
	A.	A. [] Debtor(s)' earnings, wages, compensation for services performed						
	B.							
		TO DEBTOR BY ATTORNEY JANE	Y J. LAMAR THROUGH LEGAL S	SERVICES OF EASTERN MICHIGAN				
7.	The ur	The undersigned has not shared or agreed to share, with any other person, other than with members of the undersigned's law firm or						
	corpor	ration, any compensation paid or to be paid	except as follows: N/A.					
Dated	d: <u>06/20/</u>	2019	/s/ Janey J. Lamar Attorney for the Debtor(s)					
∆ gree	ed·/e/ A+	keasha Burt	,					
Agree			D.L.					
	Debtor	Γ	Debtor					

Certificate Number: 15725-MIE-CC-032986862



CERTIFICATE OF COUNSELING

I CERTIFY that on June 18, 2019, at 3:35 o'clock PM EDT, Arkensha Burt received from 001 Debtorcc, Inc., an agency approved pursuant to 11 U.S.C. 111 to provide credit counseling in the Eastern District of Michigan, an individual [or group] briefing that complied with the provisions of 11 U.S.C. 109(h) and 111.

A debt repayment plan <u>was not prepared</u>. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet.

Date: June 18, 2019

By: /s/Raul Calero

Name: Raul Calero

Title:

Counselor

* Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. *See* 11 U.S.C. 109(h) and 521(b).